UNITED STATES DISTRICT COURT SOUTHERN DISTRICT OF NEW YORK

AMAURY URENA,

Plaintiff,

-against-

CITY OF NEW YORK; CAPTAIN PINES; CAPTAIN CLARKE; C.O. GORDON; ESU CAPTAIN JOHNSON; CAPTAIN CHMUT; (D.W. JOHN DOE); C.O. JANE DOE; C.O. JOHN DOE,

Defendants.

22-CV-1189 (VEC)
ORDER OF SERVICE

USDC SDNY DOCUMENT

DATE FILED:

ELECTRONICALLY FILED

3/8/2022

VALERIE CAPRONI, United States District Judge:

Plaintiff, currently incarcerated in the North Infirmary Command on Rikers Island, brings this *pro se* action under 42 U.S.C. 1983, alleging that Defendants subjected him to excessive force and denied him adequate and timely medical attention. By order dated March 1, 2022, the Court granted Plaintiff's request to proceed without prepayment of fees, that is, *in forma pauperis* (IFP).¹

DISCUSSION

A. Waiver of service

The Clerk of Court is directed to notify the New York City Department of Correction and the New York City Law Department of this order. The Court requests that Defendants the City of New York, Captain Pines, Captain Clarke, C.O. Gordon, Emergency Service Unit (ESU) Captain Johnson, and Captain Chmut waive service of summons.

Prisoners are not exempt from paying the full filing fee, even when they have been granted permission to proceed IFP. See 28 U.S.C. § 1915(b)(1).

B. Unidentified "Doe" defendants

Under *Valentin v. Dinkins*, a *pro se* litigant is entitled to assistance from the district court in identifying a defendant. 121 F.3d 72, 76 (2d Cir. 1997). In the complaint, Plaintiff alleges that the underlying events occurred in the Robert N. Davoren Center and the George R. Vierno Center. Plaintiff appears to supply sufficient information to permit the City of New York to identify: (1) the John Doe correction officer who sprayed Plaintiff with a chemical agent after 7:00 p.m. on January 7, 2022; (2) the Jane Doe correction officer who was in charge of the intake post after 7:00 p.m. on January 7, 2022; and (3) any other correction officer, captain, or member of the ESU who was involved in the events occurring between January 7, 2022, and January 14, 2022. (ECF 2 at 7-8.)

It is therefore ordered that the New York City Law Department, which is the attorney for and agent of the New York City Department of Correction ("DOC"), must ascertain the identity and badge number of each unidentified defendant whom Plaintiff seeks to sue here and the address where each of those defendants may be served.² The Law Department must provide this information to Plaintiff and the Court within sixty days of the date of this order.

Within thirty days of receiving this information, Plaintiff must file an amended complaint naming the newly identified defendants. The amended complaint will replace, not supplement, the original complaint. An amended complaint form that Plaintiff should complete is attached to this order. Once Plaintiff has filed an amended complaint, the Court will screen the

If any unidentified defendant is a current or former DOC employee or official, the New York City Law Department should note in the response to this order that an electronic request for a waiver of service can be made under the e-service agreement for cases involving DOC defendants, rather than by personal service at a DOC facility. If any unidentified defendant is not a current or former DOC employee or official, but otherwise works or worked at a DOC facility, the New York City Law Department must provide a residential address where the individual may be served.

amended complaint and, if necessary, issue an order asking the newly named defendants to waive service.

C. Local Civil Rule 33.2

Local Civil Rule 33.2, which requires defendants in certain types of prisoner cases to respond to specific, court-ordered discovery requests, applies to this action. Those discovery requests are available on the Court's website under "Forms" and are titled "Plaintiff's Local Civil Rule 33.2 Interrogatories and Requests for Production of Documents." Within 120 days of the date of this order, the identified defendants must serve responses to these standard discovery requests. In their responses, the identified defendants must quote each request verbatim.³

CONCLUSION

The Clerk of Court is directed to electronically notify the New York City Department of Correction and the New York City Law Department of this order. The Court requests that Defendants the City of New York; Captain Pines; Captain Clarke; Correction Officer Gordon; ESU Captain Johnson; and Captain Chmut waive service of summons.

The Clerk of Court is also directed to mail a copy of this order and the complaint to the New York City Law Department at 100 Church Street, New York, N.Y. 10007.

The Clerk of Court is further directed to mail a copy of this order to Plaintiff together with an information package.

An "Amended Complaint" form is attached to this order.

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If Plaintiff would like copies of those discovery requests before receiving the responses and does not have access to the website, Plaintiff may request them from the court's Pro Se Intake Unit.

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The Court certifies under 28 U.S.C. § 1915(a)(3) that any appeal from this order would not be taken in good faith, and therefore IFP status is denied for the purpose of an appeal. *Cf. Coppedge v. United States*, 369 U.S. 438, 444-45 (1962) (holding that an appellant demonstrates good faith when he seeks review of a nonfrivolous issue).

SO ORDERED.

Dated: Mare

March 8, 2022 New York, New York

VALERIE CAPRONI
United States District Judge

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UNITED STATES DISTRICT COURT SOUTHERN DISTRICT OF NEW YORK

Write the full name of each plaintiff.	CV (Include case number if one has bee assigned)
-against-	AMENDED COMPLAINT (Prisoner)
	Do you want a jury trial? ☐ Yes ☐ No
Write the full name of each defendant. If you cannot fit the names of all of the defendants in the space provided, please write "see attached" in the space above and attach an additional sheet of paper with the full list of names. The names listed above must be identical to those contained in Section IV.	

NOTICE

The public can access electronic court files. For privacy and security reasons, papers filed with the court should therefore *not* contain: an individual's full social security number or full birth date; the full name of a person known to be a minor; or a complete financial account number. A filing may include *only*: the last four digits of a social security number; the year of an individual's birth; a minor's initials; and the last four digits of a financial account number. See Federal Rule of Civil Procedure 5.2.

State below the federal legal basis for your claim, if known. This form is designed primarily for

I. LEGAL BASIS FOR CLAIM

often brought under	•	nst state, county,	s of confinement; those claims ar , or municipal defendants) or in a	е
☐ Violation of my	federal constitutional	rights		
☐ Other:				
II. PLAINTIF	F INFORMATION			
Each plaintiff must p	rovide the following in	formation. Attach	h additional pages if necessary.	
First Name	Middle Initial	Last Na	lame	
	es (or different forms oviously filing a lawsuit		u have ever used, including any na	эте
	have previously been i such as your DIN or NY		r's custody, please specify each ag you were held)	gency
Current Place of Det	ention			
Institutional Address				
County, City		State	Zip Code	
III. PRISONEF	R STATUS			
Indicate below whet	her you are a prisoner	or other confined	d person:	
☐ Pretrial detained	ġ.			
☐ Civilly committee	ed detainee			
☐ Immigration det				
	entenced prisoner			
Other:				

IV. DEFENDANT INFORMATION

To the best of your ability, provide the following information for each defendant. If the correct information is not provided, it could delay or prevent service of the complaint on the defendant. Make sure that the defendants listed below are identical to those listed in the caption. Attach additional pages as necessary.

Defendant 1:						
	First Name	Last Name	Shield #			
	Current Job Title (or other identifying information)					
	Current Work Addr	ess				
	County, City	State	Zip Code			
Defendant 2:	First Name	Last Name	Shield #			
	Current Job Title (o	r other identifying information)				
	Current Work Addr	Current Work Address				
	County, City	State	Zip Code			
Defendant 3:						
	First Name	Last Name	Shield #			
	Current Job Title (or other identifying information) Current Work Address					
	County, City	State	Zip Code			
Defendant 4:			01:11"			
	First Name	Last Name	Shield #			
	Current Job Title (or other identifying information) Current Work Address					
	County, City	State	Zip Code			

V. STATEMENT OF CLAIM
Place(s) of occurrence:
Date(s) of occurrence:
FACTS:
State here briefly the FACTS that support your case. Describe what happened, how you were harmed, and how each defendant was personally involved in the alleged wrongful actions. Attach additional pages as necessary.

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INJURIES:
If you were injured as a result of these actions, describe your injuries and what medical treatment, if any, you required and received.
VI. RELIEF
State briefly what money damages or other relief you want the court to order.

VII. PLAINTIFF'S CERTIFICATION AND WARNINGS

By signing below, I certify to the best of my knowledge, information, and belief that: (1) the complaint is not being presented for an improper purpose (such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation); (2) the claims are supported by existing law or by a nonfrivolous argument to change existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Federal Rule of Civil Procedure 11.

I understand that if I file three or more cases while I am a prisoner that are dismissed as frivolous, malicious, or for failure to state a claim, I may be denied *in forma pauperis* status in future cases.

I also understand that prisoners must exhaust administrative procedures before filing an action in federal court about prison conditions, 42 U.S.C. § 1997e(a), and that my case may be dismissed if I have not exhausted administrative remedies as required.

I agree to provide the Clerk's Office with any changes to my address. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

Each Plaintiff must sign and date the complaint. Attach additional pages if necessary. If seeking to proceed without prepayment of fees, each plaintiff must also submit an IFP application.

Dated		Plaintiff's Signature	
First Name	Middle Initial	Last Name	
Prison Address			
County, City	State		Zip Code
Date on which I am delivering this complaint to prison authorities for mailing:			